## HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS (SHORT FORM)

NAME (Last, First, Middle)	STATE POSITION HELD: (Dept/Div or Board/Commission) Trustee for Kauai/Nii Nau Office of Hawaiian Affairs	
CATALUNA, Donald Bruce	Office of Hawaiian Affairs TERM OF OFFICE (Begin/End): 2000 - 2008	

Check either number 1 or 2. If you check number 2, provide the relevant information.

- 1. I HAVE NO CHANGES TO REPORT SINCE MY LAST FILING
- 2. I HAVE THE FOLLOWING CHANGES TO REPORT SINCE MY LAST FILING.
  FOR EACH ITEM, DISCLOSE ADDITIONS, DELETIONS, OR CHANGES IN INTERESTS OF FILER,
  SPOUSE AND DEPENDENT CHILDREN. USE THE ABBREVIATIONS: "F" for filer, "SP" for spouse, "DC" for
  dependent children, and "JT" for joint interests of the spouse and filer. Use "A" for any additions in interests, "D" for any
  deletions, and "C" for any other changes.

	1	
F, SP, DC, JT	A. D. C	ITEM # /_
sp	& D	ST. of Howaii - Teacher - no income DOE (wife no longer employed
		by DOE.)
F, SP, DC, JT	A, D, C	ITEM# 2
	` .	(agribusiness) Value of
JT	e	C. Brewer + Co, Ltd. (stockholder) share
٦١		P.O.D A 1826 (SIDER 1101400)
		105, 00 HT 01 201 1006
		Papai Kou, HI 96781-1826
F, SP, DC, JT	<u>A, D, C</u>	ITEM# 6
JT	e	5584 Tapa St. 2-8.026-053 H Kolog Kanai 96752
		V4497 Malulani St. 5-2-009-013 H)
		Kilanea Kanai 96754 , Same as last
F, SP, DC, JT	A, D, C	Kilanea Kanai 96754 Same as last ITEM# tiling porion
		( ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '

			4/4	Donald D. CATHLUM.
F, SP, DC, JT	A, D, C	ITEM#		
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F, SP, DC, JT	A, D, C	ITEM#		
F, SP, DC, JT	<u>A, D, C</u>	ITEM #		
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F, SP, DC, JT	A, D, C	ITEM#		
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F, SP, DC, JT	A.D.C	ITEM#		MAY MAY
	·			
5 0D DO 17			<del> </del>	j li
F, SP, DC, JT	<u>A, D, C</u>	ITEM#		
				-

CERTIFICATION: I have reviewed my previous Disclosure of Financial Interests Statements filed with the Hawaii State Ethics Commission and all succeeding amendments. I hereby certify that the above is a true, correct, and complete statement to the best of my knowledge and belief of my currently reportable financial interests and that there have been no other changes in my reportable financial interests since my prior reports were filed. If I have a spouse and/or dependent children, I also hereby certify that I have included their interests on this form to the best of my knowledge and belief. I understand that it is a violation of State law, chapter 84, HRS, if information is not disclosed as required by chapter 84, HRS. I further understand that there are statutory penalties for noncompliance.

SIGNATURE (Note: This filing is not valid without a signature.)

5/9/05

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